

Data Evaluation Documentation and Findings

Parcel:		Unit:						
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Section I: Reason For Evaluation (Summary of Flagged Data):										
1) K-S Test: Pass/Fail?									Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
Units Evaluation Flags										
Ac-228	Bi-212	Bi-214	Cs-137	K-40	Pb-212	Pb-214	Ra-226	Total		
Days Evaluation Flags										
Ac-228	Bi-212	Bi-214	Cs-137	K-40	Pb-212	Pb-214	Ra-226	Total		
2) Logic Tests: Pass/Fail?									Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
Logic Test 1: Were FSS samples collected on the same day? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
Logic Test 2: Were FSS samples collected on the same day or after confirmatory/biased samples were collected? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
Logic Test 3: Were samples collected before they were counted? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
Logic Test 4: Were all FSS samples analyzed within 2 working days? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
Logic Test 5: Were samples counted within 2 weeks of sample collection? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
Logic Test 6: Is the mass of the sample reported by the onsite lab the same as the mass reported by the offsite lab? Observation:									Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) Time Series Plots: Pass/Fail?									Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
Bi-214	Anomalies or unusual trends identified?								No <input type="checkbox"/>	Yes <input type="checkbox"/>
	Notes:									
Ac-228	Anomalies or unusual trends identified?								No <input type="checkbox"/>	Yes <input type="checkbox"/>
	Notes:									
K-40	Anomalies or unusual trends identified?								No <input type="checkbox"/>	Yes <input type="checkbox"/>
	Notes:									
4) Historically Significant Site Location: Yes/No?									No <input type="checkbox"/>	Yes <input type="checkbox"/>
Was a known radiation cleanup performed at (or near) this site?									No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, where?										
Is the sewer line connected to or downstream from a radiologically-impacted building?									No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, which building?										
5) Allegation: Yes/No?									No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, description:										

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Section II: Evaluations Performed				
1) Other Statistics Results			Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
Box Plots	Anomalies or unusual trends identified?		No <input type="checkbox"/>	Yes <input type="checkbox"/>
Notes:				
Normal Quantile Plots	Anomalies or unusual trends identified?		No <input type="checkbox"/>	Yes <input type="checkbox"/>
Notes:				
2) Additional Database Review Performed?			No <input type="checkbox"/>	Yes <input type="checkbox"/>
Review objectives:				
Observations:				
3) Adjacent Survey/Trench Unit Review			Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
List of Adjacent Units:				
Was a review of adjacent unit's data performed?				
Anomalies or unusual trends identified?			No <input type="checkbox"/>	Yes <input type="checkbox"/>
Notes:				
4) SUPR or FSSR Review Performed?				
Summary of Excavation / Sampling Activities				
Gamma Static Data Observations:				
Gamma Scan Data Observations:				
List of Excavation / Overburden Units Used for Backfill				
Onsite / Offsite Lab Data Comparison:				
Scan / Static Surveyor Name:				
Sampler / Surveyor Name:				
5) RACR or CSR Review Performed?				
List of Excavation / Overburden Units Created from Excavation:				

Section III: Conclusions and Recommendations			
Summary of Findings:			
<input type="checkbox"/> No Further Action	<input type="checkbox"/> Reanalyze Archived Samples	<input type="checkbox"/> Confirmation Sampling	<input type="checkbox"/> Physical Inspection of Archived Samples
<input type="checkbox"/> Other Recommendations:			

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Section III: Conclusions and Recommendations

Additional Information Required:

Completed by: _____

Date: _____

Reviewed by: _____

Date: _____

Approved by: _____

Date: _____

Acronyms:

Ac	Actinium (e.g., Ac-228)
B	Former Building (or other site) Surface Soil Survey Unit
Bi	Bismuth (e.g., Bi-214)
Cs	Cesium (e.g., Cs-137)
CSR	Construction Summary Report
ESU	Excavation Survey Unit
FSS	Final Status Survey
FSSR	Final Status Survey Report
K	Potassium (e.g., K-40)
OB	Overburden Unit
Pb	Lead (e.g., Pb-212)
pCi/g	picocuries per gram
Ra	Radium (e.g., Ra-226)
RACR	Remedial Action Completion Report
S	Sewer or Storm Drain Removal Survey Unit
SUPR	Survey Unit Progress Report
TU	Trench Unit

Data Evaluation Documentation and Findings
Time-Series Plots

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Box Plots

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Normal Quantile Plots

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Map